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**FEC** FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

TYPE OR PRINT ▼

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Office Use Only

1.	NAME (	OF ITEE (in full)	TYPE OR	PRINT V		mple: If typing, the lines.	type :	12FE4M	5	. 0211	
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ΑD	DRESS (1	number and street)	PO	BOX 9	1202	<u> </u>					لسب
	thai	eck if different n previously orted. (ACC)	IMC IMMC	14101R1 AG	ì <u>E</u>			AK	<b>19</b> 95	251- -1-1-	
2.	FEC ID	ENTIFICATION NU	JMBER 🔻		CITY A		S	TATE 🛦		ZIP COE	DE 🛦
	C ပ	05443	46	3.	IS THIS REPORT	X NEV	OR	A (A	MENDED		
4.	TYPE OF REPORT (Choose One)  (a) Quarterly Reparts:  April 15			(b) Monthly Feb 20 (M2 Report Due On: Mar 20 (M3 Apr 20 (M4		May 20 (M5)  Jun 20 (M6)  Jul 20 (M7)		Aug 20 (M8) Sep 20 (M9) Oct 20 (M10)		Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE)	
		Quarterly Report (C July 15 Quarterly Report (C October 15 Quarterly Report (C January 31 Year-End Report (Y	(C) (22)	12-Day PRE-Election Report for the	: ction on	Primary (12P)  Convention (12C)  M M / D	;) , , ,	General Special	(128)	in the	Runoff (12R)
	×	July 31 Mid-Year Report (Non-electio Year Only) (MY) Termination Report (TER)	n (d)	30-Day POST-Electior Report for the	1	General (30G)	י , ם	Runoff (			Special (30S)
<b></b> 5.	Covering	g Period Ö	5 ′ ů	2 20	ĭš	through	M M	′ 3 0	/ 20	13	

Signature of Treasurer		be			Date	08	15	26	ž
NOTE: Submission of false	erroneous,	or incomplete	information may	y subject the persor	n signing this Re	port to the	penalties of	2 U.S.C. §4	37g.

Lottsfeld+

Office **FEC FORM 3X** Use Rev. 12/2004 Only

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

James

FE6AN026

Type or Print Name of Treasurer